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## BIB DATA SHEET

CONFIRMATION NO. 3166

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/749,102		417	3626	EIS-5909A (1417G P 858)

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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/444,350 02/01/2003  
 and claims benefit of 60/488,273 07/18/2003  
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**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
03/11/2004

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		WI	58	58	3
Verified and /KRISTINE K RAPILLO/ Acknowledged Examiner's Signature		Initials				

**ADDRESS**

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 UNITED STATES

**TITLE**

System and method for notification and escalation of medical data

<b>FILING FEE RECEIVED</b> 1584	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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